

BEST AVAILABLE COPY

CLAIMS ONLY						Application Number 10/601796		Filing Date	
						Applicant(s)			
						* May be used for additional claims or amendments			
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	
	Indep	Depend	Indep	Depend	Indep	Depend			
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Total Indep	2	1	2	1	2				
Total Depend	16		16		3				
Total Claims	18		18		5				